PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number

Effective on 12/08/2004		Complete if Known					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).). Application Nu	ımber	10/578,254-Conf. #6745		5	
FEE TRANSMITTAL		Filing Date		February 5, 2007			
For FY 2009		First Named In		Susumu YAMAGUCHI			
		Examiner Nam	Examiner Name L. Williams		ucaran managan	***************************************	
Applicant claims small entity status. See 37 CFR 1.27		Art Unit	7 (It Offic		1794		
TOTAL AMOUNT OF PAYMENT	Attorney Docke	Attorney Docket No. 4600-0120PUS					
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
X Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
		EARCH FEES		NATION FEES			
Application Type Fee (\$)	Small Entity Fee (\$) Fee	Small Entity (\$) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees F	Paid (\$)	
Utility 330	165 54	270	220	110			
Design 220	110 10	50	140	70		***	
Plant 220	110 33	165	170	85			
Reissue 330	165 54	270	650	325			
Provisional 220	110	0	0	0			
2. EXCESS CLAIM FEES Small Entity							
Fee Description Each claim over 20 (including Reissues)					Fee (\$)	Fee (\$)	
Each independent claim over 3 (including Reissues)					52	26	
Multiple dependent claims					220 390	110 195	
Total Claims				Multiple Dependent Claims			
15 - 24 or HP 0 x	0.00	_		ee Paid (\$	١ .		
HP = highest number of total claims paid for, if gre	ater than 20.		2_2			'	
Indep. Claims Extra Claims	Fee Paid (\$)	·			_		
5 - 5 or HP = 0 × 220.00 = 0.00							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S)						Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1251 Extension for response within first month 130.00							
SUBMITTED BY							
Signature	47,604	Registration No. (Attorney/Agent)	28,977	Telephone	(703) 205	-8000	
Name (Print/Type) Geraid M. Murphy, Jr.				Date	May 21,	2010	